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Urban District of Farnworth

ANNUAL REPORT

OF THE

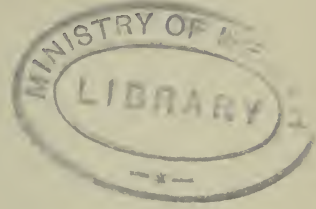
Medical Officer of Health

FOR THE YEAR 1925.

By A. G. GLASS, M.A., M.D., D.P.H.,
Medical Officer of Health.

ROBERT COOKE, LIMITED, BAINBRIDGE, FARNWORTH.

Urban District of Farnworth



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MEDICAL OFFICER OF HEALTH.

Members of the Health Committee.

Chairman:

COUNCILLOR CUNLIFFE, J.P.

Vice-Chairman:

Councillor RICHARDSON.

Members:

Councillor H. BARNES.

„ BIRCH.

„ CLARE.

„ CLAYTON.

„ FARNWORTH.

„ FEENEY.

„ HARGREAVES.

„ HOKER.

„ SHIPPOBOTTOM.

„ STONES, J.P.

„ TAYLOR.

„ WILCOCKSON.

„ WINTER, C.C.

Maternity and Child Welfare Committee.

Chairman:

COUNCILLOR MRS. BARNES, O.B.E., J.P.

Members:

Councillor CUNLIFFE, J.P.

„ FARNWORTH.

„ HARGREAVES.

„ RICHARDSON.

„ TAYLOR.

„ TOMLINSON.

„ WILCOCKSON.

Co-opted Members.

Mrs. COOKE. Mrs. STEVENSON.

„ HODGE. „ SCOTT.

„ JONES. „ WILCOCKSON.

Hospital Committee.

Chairman:

COUNCILLOR MRS. BARNES, O.B.E., J.P.

Members:

Councillor CUNLIFFE, J.P.

„ FARNWORTH.

„ HARGREAVES.

„ RICHARDSON.

„ TAYLOR.

„ TOMLINSON.

„ WILCOCKSON.

Councillor WHITE, J.P. is (ex-officio) a member of all three Committees.

To the Chairman and Members of the Health Committee.

GENTLEMEN,

I have pleasure in submitting my Annual Report for 1925 on the Health of the Urban District of Farnworth.

In accordance with Circular 540 of the Ministry of Health, the Report this year is a "Survey Report," that is to say, it deals with

- (a) the measure of progress made in the area during the preceding *five* years in the improvement of the public health; and
- (b) the extent and character of the changes made during that period in the public health service of the area.

The order and the arrangement of the present report follow the lines laid down in Circular 648 of the 10th December, 1925.

I remain, Gentlemen,

Your obedient servant,

A. G. GLASS.

Natural and Social Conditions of the Area.

Area.

The area of the district is 1504 statute acres, that for the different wards being as follows:—

North	94 acres.
North-East	118 „
North-West	463 „
South	128 „
South-East	130 „
South-West	571 „

Population.

Census, 1911	28,131
Census, 1921	27,894
Estimated, 1925	29,030

DISTRIBUTION OF POPULATION AMONG THE VARIOUS WARDS (CENSUS, 1921):—

WARDS.	PERSONS.	MALES.	FEMALES.
North	3922	1791	2131
North-East	2802	1341	1461
North-West	6234	2910	3324
South	5120	2396	2724
South-East	3233	1450	1783
South-West	6583	3112	3471

Physical Features and General Character of the Area.

The Urban District of Farnworth is situated in East-Lancashire, about $2\frac{1}{2}$ miles S.E. of Bolton and 8 miles N.W. of Manchester. Through its most congested part runs the main road from Bolton to Manchester.

On its N.E. boundary flows the river Croal, near its junction with the Irwell.

To the West, where all the farms are situated, there is a considerable amount of undeveloped land. The geological formation is, except for patches of sand, boulder clay overlying the coal measures.

The altitude varies from 325 to 457 feet above Ordnance datum. The situation of the town is favourable to free exposure to light and air, and has a good fall for drainage, the general slope being from West to East.

The town is divided into six wards, the most congested being the North and the South wards, with a density of 41·7 and 40·0 persons per acre respectively. The density of the district as a whole is 18·5 persons to the acre.

Meteorological Notes for 1925.

Total sunshine	1063·1 hours
Temperature: Highest	70·5°F.
Lowest	31·9°F.
Mean	47·40°F.

Rainfall:

Maximum in one day 1·43- (May 19)

Total, 1925 45·002"

Average, 1887-1925 43·462"

Wind: North 646 hours

North-East 1016 "

East 766 "

South-East 743 "

South 1003 "

South-West 1215 "

West 1197 "

North-West 550 "

Calm 1624 " * -

Number of inhabited houses (1921) 6118

Number of Families or Separate Occupiers (1921) 6,186

Rateable Value £138,018

Sum represented by a penny rate £552

Social Conditions, including the Chief Occupations of the Inhabitants, and the influence of any particular Occupation on Public Health:—

The population is mainly of the working class. The principal employment is in connection with the textile and the coal mining industries. Of the 6017 textile workers, no fewer than 4090 are women, many of them being married. The district contains a considerable number of Irish labourers and miners.

*This information has been kindly supplied by Mr. Thomas Midgley, F.R.Met.Soc., Bolton.

Vital Statistics.**BIRTHS:**

	Males.	Females.	Total.
Legitimate	240	236	} 500
Illegitimate	8	16	
Birth-rate per 1,000 population			17·3

DEATHS:

	Males.	Females.	Total.
	166	171..	337
Death-rate per 1,000 population			11·6
Corrected death-rate			12·4

Deaths of Infants under 1 year:—

	Males.	Females.	Total.
Legitimate	19	17	} 40
Illegitimate	2	2	
Infantile Mortality Rate			80

RATES PER 1,000 POPULATION.

	Birth Rate.	Death Rate.	Tubercu- losis Death-rate (Respira- tory).	Infantile Mortality Rate.
Mean of 5 years:—				
1895-1899	32·0	20·4	1·13	242
1900-1904	28·3	18·4	0·99	220
1905-1909	27·0	16·7	1·13	186
1910-1914	23·3	14·1	0·75	160
1915-1919	18·6	16·7	1·16	126
1920-1924	20·4	12·4	0·87	91
Year:				
1924	17·6	11·7	0·72	103
1925	17·2	11·6	0·79	80
Increase or decrease in 1925 on Mean of 5 years, 1920- 1924.. .. .	— 3·2	— 0·8	— 0·08	— 11
Previous year	— 0·4	— 0·1	+ 0·07	— 23

TABLE I.

Showing Birth Rates, Death Rates and Infantile Mortality Rates
for Farnworth since 1911, compared with England
and Wales.

Year.	Birth Rates.		Death Rates.		Infantile Mortality Rates.	
	England & Wales.	Farnworth.	England & Wales.	Farnworth.	England & Wales.	Farnworth.
1911	24·3	23·3	14·2	16·5	130	224
1912	23·9	22·7	13·0	12·5	95	109
1913	24·1	22·4	13·5	15·0	108	215
1914	23·8	23·1	13·7	14·3	105	122
1915	21·9	19·8	14·8	18·3	110	172
1916	20·9	18·5	13·4	15·1	91	104
1917	17·8	18·4	13·5	16·1	96	112
1918	17·7	18·1	17·1	17·1	97	113
1919	18·5	17·0	13·3	16·9	89	127
1920	25·4	24·2	12·1	12·9	80	125
1921	22·4	23·8	11·5	12·5	83	90
1922	20·6	18·6	12·9	13·0	77	68
1923	19·7	17·8	11·6	12·0	69	69
1924	18·8	17·6	12·2	11·7	75	103
1925	18·3	17·2	12·2	12·4	75	80

CAUSES OF DEATH IN 1925.

Measles	6
Whooping cough	3
Diphtheria	1
Influenza	4
Encephalitis Lethargica	2
Tuberculosis of respiratory system	23
Other tuberculous diseases	7
Cancer; malignant disease	30
Diabetes	2
Cerebral hæmorrhage, etc.	22
Heart disease	42
Arterio-sclerosis	17
Bronchitis	29
Pneumonia (all forms)	43
Other respiratory diseases	2
Ulcer of stomach or duodenum.. .. .	1
Diarrhœa, etc. (under 2 years).. .. .	9
Appendicitis and typhlitis	3
Acute and chronic nephritis	13
Puerperal sepsis	1
Other accidents and diseases of pregnancy and parturition.. .. .	1
Congenital debility and malformation, premature birth.. .. .	15
Suicide	1
Other deaths from violence.. .. .	14
Other defined diseases	46

The diseases which produced the largest number of deaths—65 per cent. of the total—are given in the following table. For purposes of comparison the corresponding figures for the three previous years are given:—

TABLE II.

CAUSES OF DEATH.	NUMBER OF DEATHS.			
	1922	1923	1924	1925
Pneumonia	39	35	42	43
Heart disease	56	46	41	42
Cancer	31	34	32	30
Tuberculosis (all forms)	32	29	26	30
Bronchitis	40	41	25	29
Arterio-sclerosis	13	18	20	17
Cerebral hæmorrhage	19	20	18	22
Congenital debility; premature birth.. .. .	13	17	17	15

Infant Mortality.

It is satisfactory to be able to report a considerable fall in the infantile mortality rate, which was 80 per 1,000 registered births, against 103 for the previous year. Over the five year period, 1920-1924, there has been a decrease of 11 per 1,000 registered births.

TABLE III.

Showing Infantile Mortality Rates of Towns of over 25,000 population in the administrative County of Lancaster, for the year 1925.

NAME OF TOWN.	Infantile Mortality Rate.
Accrington	61
Ashton-under-Lyne	92
Chadderton.. .. .	110
Chorley	103
Darwen	119
Eccles	68·09
Heywood	90
Lancaster	86
Leigh	99
Lytham-St. Annes	67
Middleton	95
Nelson.. .. .	78
Radcliffe	63
Rawtenstall	87
Stretford	72
Swinton and Pendlebury.. .. .	72
Waterloo-with-Seaforth	99
FARNWORTH	80
ENGLAND AND WALES	75

Births.

504 live births were registered in Farnworth during the year, these being divided amongst the various wards as follows:—

NORTH	SOUTH.	NORTH- WEST.	SOUTH- WEST.	NORTH- EAST.	SOUTH- EAST.
64	83	94	131	60	72

Allowing for inward and outward transfers, the nett number of births to be correctly assigned to the district was 500, giving a birth-rate per 1,000 of the population of 17·2. This is a fall of 0·4 per 1,000 on the rate for 1924, and a fall of 3·2 per 1,000 on the period 1920-1924.

Every succeeding year discloses a further decline in the birth-rate (see Table I). There can be little doubt that the chief factor concerned in this is the rapid spread of birth-control methods amongst all classes of the community.

Deaths.

The number of deaths registered in Farnworth during 1925 was 288. After allowance for inward and outward transfers the nett number belonging to the district was 337, giving a death-rate of 11·6 per 1,000 of the population.

Any Cause of Sickness and Invalidity which have been specially noteworthy during the period under review.

With regard to notifiable infectious diseases, reference to the table on page 30 will show that the district has been remarkably free from epidemics during the past five years. There has been a gradual fall in the incidence of diphtheria, and the prompt use by medical practitioners of large doses of antitoxin has resulted, not only in the saving of lives, but also in preventing sequelae.

The almost entire disappearance of enteric fever is one of the most striking evidences of the improvement in general sanitary conditions.

As regards non-notifiable diseases, there was a severe epidemic of influenza and measles in 1922, resulting in much disablement. A milder epidemic of influenza occurred also in the following year, along with an outbreak of chickenpox.

In 1924 the first notifications of encephalitis lethargica were received. By the end of that year 14 cases had been notified. Up to the present only 2 deaths have resulted from the disease, but the disability produced has been profound, and it is doubtful whether any of them have fully recovered.

Diseases of the respiratory system are prevalent in the district, as indeed they are in all industrial areas, and must be attributed—in part at least—to the impurity of our town atmosphere.

General Provision of Health Services in the Area.

Hospitals available for the Area.

(1) TUBERCULOSIS:

The treatment of tuberculosis is undertaken by the County Council, who have available the following Institutions:—

(a) Sanatoria for adults (for early, educational or observation cases)	9
(b) Sanatoria and Training Colonies	1
(c) Pulmonary Hospitals (for advanced, educational and observation cases)	16
(d) Observation Hospital	2
(e) Non-pulmonary (Surgical) Hospitals—Adults and children..	12
(f) Non-pulmonary (Skin) Hospital	1
(g) Children's Sanatoria (pulmonary cases only)	4

Cases are also sent for treatment to the General Hospitals.

(2) MATERNITY:

Townleys Hospital is available for cases of labour. This hospital is under the administration of the Bolton Union, and receives no contribution from the Farnworth Council. During the year the Council approached the Guardians with a view to making definite arrangements for the reception of maternity cases from the area, but, owing to limited accommodations, the Guardians could not see their way to make any binding agreement. Up to the present, however, no difficulty has been experienced in obtaining admission for cases from the district.

Complicated labour cases can also be sent to St. Mary's Hospital, Manchester, to which the Council pay an annual contribution of £10 0s. 0d.

(3) CHILDREN.

Children are admitted to

- (a) Townleys Hospital (no contribution)
- (b) Manchester Children's Hospital, Pendlebury (annual contribution, £7 0s. 0d.).
- (c) Bolton Infirmary (annual contribution, £21 0s. 0d.).

With regard to Bolton Infirmary, the Farnworth Education Committee have an agreement for the operative treatment of tonsils and adenoids, at a cost of 25s. 0d. per case, plus 7s. 6d. per night detained in hospital.

(4) FEVER.

The Farnworth Isolation Hospital was closed at the end of 1924. Since then cases of infectious disease have been sent to Ladywell Sanatorium, an agreement having been made with the Salford Corporation for the reception of such cases at £4 4s. 0d. per week. Cases are removed to Ladywell in the Council's motor ambulance.

(5) SMALLPOX.

Arrangements exist for the reception of smallpox cases at the Bury & District Joint Hospital. A retaining fee of £110* per annum is paid, plus maintenance and administrative costs.

(6) OTHER HOSPITALS.

- (a) Royal Infirmary, Manchester (annual contribution £12 12s. 0d.).
- (b) Royal Infirmary, Salford (annual contribution £5 5s. 0d.).
- (c) Eye Hospital, Manchester (annual contribution £3 3s. 0d.).
- (d) Skin Hospital, Manchester (annual contribution £5 5s. 0d.).

From the above list it will be seen that Farnworth is exceptionally well provided for in the matter of hospital facilities. Extensive use is made of the Hospitals, and our best thanks are due to the honorary medical and surgical staffs for their untiring efforts.

Ambulance Facilities.

- (a) For infectious cases—Hospital motor ambulance.
- (b) For non-infectious and accident cases—Two motor ambulances, kept at the Fire Station.

Institutional Provision for Unmarried Mothers, Illegitimate Infants' and Homeless Children.

No institution exists in the area for the reception of unmarried mothers and illegitimate infants. If they are destitute they are received into Townleys. With regard to homeless children, these are provided for by the Guardians, who own 13 Cottage Homes, with certified accommodation for 208 children. Each home is under the charge of a foster-mother, who is responsible for its good conduct. The children are kept till they are 18 if they have no parents, or if they are deserted. Some of them are boarded out, and some become adopted, but in either case they remain under the supervision of the Guardians up to the age of 18. Between 18 and 21 their interests are still safeguarded by the Guardians' After-care Committee.

The children are frequently examined at the school medical inspections, and the School Medical Officer's reports on their nutrition and general cleanliness have been uniformly satisfactory. Any medical defects found receive prompt attention.

*The retaining fee was formerly £74 per annum, but was raised to £110 as from April 1st, 1925.

Clinics and Treatment Centres.

Name of Clinic.	Situation.	Nature of Accommodation.	Provided by.
M. & C.W.Clinic School Clinic. (Combined).	Wesley School, Market Street, Farnworth.	Waiting room, demonstration room, Medical Officer's consult- ing room, sur- gery, bath-room, with slipper and spray baths. lavatory accom- modation and pram shelter.	Farnworth Urban District Council.
Venereal Diseases.	Offices of Public Health Dept., Howell Croft N., Bolton.	Waiting and ante-rooms. Consulting, treatment and irrigation rooms. Lavatory & W.C. accommodation.	Bolton Corporation.
Tuberculosis.	19-23 Darley St., Farnworth.	2 waiting rooms. 2 dressing rooms (male and female) (One dressing room also being used for treat- ment). Consult- ing room, small ante-room, W.C. accommodation.	Lancashire County Council.

There are no Day Nurseries in the district.

Public Health Officers of the Local Authority.

Medical Officer of Health: ALEXANDER G. GLASS, M.A., M.D., D.P.H.
(Also M.O.H., Kearsley U.D.C.).

Sanitary Inspectors: J. MARSHALL, A.R.S.I.
S. SEEL, A.R.S.I. (Also Market Superintendent).
H. T. OGDEN, A.R.S.I. (Appointed Meat
Inspector for Farnworth, June, 1925).

Health Visitors: Miss A. PENDLEBURY, A.R.S.I.,
Certs. M. & C.W. and C.M.B.
Miss M. ASPDEN, A.R.S.I.,
Certs. M. & C.W. and C.M.B.

Clerk: Miss A. SMITH.

Professional Nursing in the Home.

(a) GENERAL.

This is carried out entirely by the District Nursing Association, which is a voluntary body, depending for its income on free-will contributions. It receives no subsidy from, and has no official connection with, either the County Council or the Local Authority.

The Association employs two trained nurses who visit the sick poor and carry out their duties under the direction of the medical attendant. They do not attend confinements, nor do they visit cases of infectious disease. The work done by the District Nursing Association is of great benefit to the community. During 1925, 6,263 visits were made by the nurses, a figure which shows the need which exists for such a service.

(b) INFECTIOUS DISEASES.

There is no domiciliary nursing service for infectious diseases. The Health Visitors visit cases of measles, whooping cough, etc., and advise parents in regard to management and treatment.

Midwives.

At the end of 1925 there were 8 registered midwives in practice in the Farnworth area. No subsidy is paid by the Local Authority for this service, and the midwives are under the supervision of the County Council.

The following table shows the number of practising midwives during the last five years, together with the annual number of births. From these figures it is difficult to see how the midwives manage to earn a livelihood.

Year.	Number of Midwives.	Number of Births.	Average Number of Births per midwife.
1921	10	682	68·2
1922	12	539	44·9
1923	11	517	47·0
1924	9	512	56·9
1925	8	500	62·5

Public Health Legislation in Force in the Area.

	NAME.	Operative from
LOCAL ACTS:	Farnworth Urban District Council Act.	1900
LOCAL ORDER:	Provisional Order for Amending the Farnworth U.D.C. Act of 1900.	..

ADOPTIVE ACTS:	Public Health Acts (Amendment) Act, 1890. Parts I to V inclusive.	1891
	Infectious Disease (Prevention) Act, 1890.	1896
	Public Health Acts (Amendment) Act 1907. Parts V, VI, Sections of Parts II, III, IV, VII, VIII and X.	1909
	Public Health Act, 1925. Parts II, III, IV and V, except Sec. 20.	March, 1926
*LOCAL BYELAWS:	Common Lodging Houses	1867
	Dairies, Cowsheds and Milkshops ..	1899
	New Streets and Buildings	1900
	Public Baths	1900
	Cleansing of Footways and Pavements ..	1900
	Nuisances	1900
	Slaughterhouses	1900
	Tripe Boilers	1900
	Sanitary Conveniences	1900

The Acts and Byelaws are all enforced.

Section 52 of the Farnworth Urban District Council Act has proved of great service to the Council in enabling them to carry out the conversion of privies to fresh-water closets free of cost to the rate payers.

The work of the Local Authority is not related to, or administered in co-operation with the Medical Services of the National Health Insurance, Poor Law, or Voluntary Hospitals, except as stated on page 11.

Sanitary Circumstances of the Area.

Water Supply.

The town is supplied with water by Bolton Corporation. The water is derived from upland gathering grounds, is soft in nature, and is of pure quality. There is no liability to plumbo-solvent action, and the possibilities of contamination have been reduced to a minimum.

The supply is constant, and there is no insufficiency anywhere. Approximately 6,327 dwelling-houses have a direct supply, there being only one house in the district—a farm—which is not connected up.†

*New Byelaws relating to (1) Common Lodging Houses; (2) Houses let in lodgings and (3) Tents, Vans and Sheds have been drafted.

†Arrangements have now been made for this farm to be supplied with Bolton Corporation Water.

Drainage and Sewerage.

Drainage is almost entirely on the combined system. The main sewage disposal plant is situated at the bottom of Hall Lane, just outside the Farnworth district. The sewage, after being screened, is precipitated with lime and alumino-ferric, afterwards passing through settling beds, from which it is conveyed by mechanical circular sprinklers on the bacteriological purification beds. The effluent, after parting with its "humus" in specially constructed tanks, finally discharges into the River Croal.

Extensive improvements, involving an outlay of some £16,000, have been effected at the sewage works, and the plant may now be regarded as up to date.

In addition to the main sewage works in Hall Lane, there is a small plant at Larkhill which deals with 114 houses. The sewage passes on to two bacterial beds, from which it flows on to a small piece of land which is underdrained, the effluent finally discharging into Singing Clough Brook. The analysis of the effluent has been uniformly good.

Closet Accommodation.

During the period under review no fewer than 2,226 privy closets have been converted to fresh-water closets—a notable achievement. At the end of 1925 there were only 345 privy closets left in the district, and these will be converted as soon as sewers are available.

It is always a difficult matter to assess improvements in health conditions in terms of statistical returns, but there can be no doubt that the abolition of the old insanitary privy-midden has contributed enormously to the raising of the hygienic level of the district.

A high infant mortality and a high typhoid incidence have in the past been closely associated with the existence of privy-middens. In Farnworth, as elsewhere, there has been a great reduction in infant mortality of late years, while typhoid fever has all but disappeared. There has also been a considerable lowering of the general death-rate, with a marked rise in the expectation of life at all ages.

Not only so, but the establishment of the water-carriage system has vastly improved the social amenities of the township. The old privy was an offence to eye and nose, was an abomination to those who had to use them, and doubly so to the workmen who had to empty them.

Up to the 30th of September, 1921, the Council contributed £4 10s. 0d. per closet towards conversion, but since that date the subsidy has been discontinued, and all conversions are carried out free of cost to the ratepayer, under Section 52 of the Farnworth Urban District Council Act of 1900.

The following table shows the progress that has been made with conversions during the past 5 years:—

ACCOMMODATION AT END OF 1925:—

Number of privy-middens	199
„ „ closets attached to these middens	345
„ „ pail closets	31
„ „ fresh-water closets	6,449
„ „ waste-water closets	599
„ „ dry ashpits (excluding middens)	1,171
„ „ movable ashbins for refuse	3,925

Conversions :

		During 1925	During 5 years 1921-1925.
Number of privy closets	To Fresh W.C.'s ..	103	2,226
	To Waste W.C.'s ..	nil	nil
	To pails, etc.	nil	nil
Number of pail closets	To Fresh W.C.'s ..	nil	32
	To Waste W.C.'s ..	nil	nil
No. of Waste W.C.'s to Fresh W.C.'s..		5	5
No. of houses at which movable ashbins have been substituted for fixed receptacles		113	2,677

Scavenging.

The whole of the scavenging of the district is carried out by the Council's workmen. One motor vehicle and four carts, the property of the Council, are used for this purpose. With regard to dwelling-houses, bins are emptied weekly, and dry ashpits and privies at varying intervals. Refuse is collected from schools and from Townleys Hospital periodically as required. Refuse is also removed from shops, places of entertainment and other premises by arrangement, a small fee being charged for the service. All refuse is removed during the day time, and is conveyed to a tip situated at the North-East corner of the town, and at a fair distance from dwellings.

Three men are employed at the tip to layer and cover objectionable matter with earth and cinders. Until recently two incinerators, which had been established at the tip, proved useful in burning the combustible material, but their use has been discontinued meantime.

There are no cesspools in the area.

Sanitary Inspection in the Area.

Tabular Summary of the Work of the Sanitary Department during the Year.

AREA NO. 1.

	WARDS.		
	North.	North-East.	North-West.
Notices:			
Preliminary notices served	59	22	123
Statutory notices served.. .. .	53	8	69
Visits:			
Works in progress for abatement of nuisances	291	198	490
Housing inspection and re-visits	296	119	284
Slaughter-houses	65	—	10
Bakehouses	53	9	27
Cowsheds	13	—	13
Cases of infectious disease	27	12	64
Privies converted to Fresh W.C.'s	—	1	19
Waste W.C.'s converted to Fresh W.C.'s	—	1	—
Bins provided in lieu of ashpits	4	1	21
Bins renewed	6	6	2
Other closet nuisances abated	2	14	12
Drains unstopped.. .. .	24	1	3
Drains reconstructed	1	—	19
Drains repaired	4	4	1
Downspouts disconnected	3	—	19
Eavespouts and roofs repaired	41	8	24
Yard pavements repaired	3	5	25
Houses limewashed, etc.	62	66	40
Offensive accumulations removed	3	—	—
Walls, ceilings and floors repaired	40	23	14
Windows made to open	66	—	—
Windows repaired	48	44	27
Doors repaired	10	30	13
Staircases repaired	4	4	—
Damp walls remedied	3	2	1
Sinks renewed	8	4	11
Ovens repaired	3	8	2
Fireplaces repaired	5	3	2
Wash-boilers repaired	1	6	2
Chimneys repaired	9	—	—
Keeping of animals	1	—	—
Miscellaneous	6	4	5

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AREA No. 2.

	WARDS.		
	South.	South-East.	South-West.
Notices:			
Preliminary Notices served	75	50	55
Statutory Notices served	51	40	29
Visits:			
Work in progress for abatement of nuisances	325	297	311
Infectious diseases	16	14	11
Cowsheds	—	—	84
Milkshops	9	9	16
Ice Cream Premises	11	7	12
Slaughterhouses Total 680			
Food Preparing premises Total 96			
Offensive Trades	7	—	11
Privies converted to W.C.'s	34	19	31
Dust bins provided in lieu of ashpits	39	19	32
Dry ashpits abolished	1	—	1
Water Closets:			
Cisterns repaired	4	7	4
Service pipes repaired	2	4	5
Doors provided	5	2	2
Houses:			
Windows repaired, renewed, or new sash cords provided	27	29	34
Fixed windows made to open	38	17	21
Ground floors repaired	18	19	13
Bedroom floors repaired	9	3	7
Staircases repaired	2	2	—
Roofs repaired	12	2	4
New doors provided or existing doors repaired	4	2	—
Washboilers provided or repaired	7	—	2
Fireplaces repaired	4	1	2
Ovens provided or repaired	2	1	—
Walls and ceilings plastered or repaired	25	17	14
Houses decorated	26	19	15
External brickwork re-pointed	7	3	4
Dangerous walls	1	—	1
Yard gates re-hung or provided	7	5	1
Cellars re-paved and drained	1	—	—
Drains:			
Opened, cleansed or relieved	9	4	6
New laid	34	19	31
Sink pipes disconnected	1	—	—
Yards paved	17	6	5
Downpipes repaired or renewed	7	3	6
Downpipes disconnected from drains	14	11	9
Eaves gutters repaired or renewed	11	7	12
Manurepits:			
Abolished	1	—	—
Covered	1	—	—
Offensive accumulations removed	2	3	4
Animals kept so as to be a nuisance	1	—	—

Smoke Abatement.

In recent Annual Reports I have dealt at some length with the smoke nuisance. Fortunately, public opinion is awakening to the fact that many lives—particularly of young children—are being sacrificed every year to our smoke-laden air. The incidence of respiratory disease is still far too high, and much of it is undoubtedly due to the effects of an impure atmosphere in the delicate linings of the air passages.

Not only so, but the ultra violet rays of the sun, whose health-giving properties are now universally recognised, are almost entirely cut off by the pall of smoke which overhangs our large towns.

The burning of coal in its raw state, both in domestic fires and in industrial furnaces, is, of course, the cause of the pollution; and as long as this continues, so long will the health of the community suffer.

Our ultimate aim must be, not so much to increase legislative restrictions in factory chimneys—important as that is—but to introduce smokeless methods in houses and factories alike.

The Smoke Abatement League of Great Britain has done useful service in enlightening the public on the evils of smoke pollution. They held two successful Conferences, one in Manchester in 1924, and the other in Buxton in 1925. At both Conferences Local Authorities were well represented, Farnworth sending two delegates.

In my Annual Report for 1924 I mentioned that Manchester Health Dept. called a Conference of all local authorities within a certain radius (the area of the Manchester and District Joint Town Planning Advisory Committee), the object of the Conference being to try and obtain uniformity of action by all authorities in the matter of smoke nuisance. The Conference was largely attended, and it was decided to form a Joint Smoke Abatement Committee, consisting of representatives of Municipal Boroughs, County Boroughs, Urban Districts and Rural Districts.

Alderman W. T. Jackson, the late Lord Mayor, was appointed Chairman, and Councillor Cunliffe, of Farnworth, Vice-Chairman.

The Committee's terms of reference were as follows:—

“To consider and submit afterwards to the Joint Committee proposals which shall have for their object the purification of the atmosphere in the areas represented, and for this purpose to include in their considerations the possibility of effecting a standardisation of procedure of the observations of smoke emission; of permissible smoke emission periods; of action taken by the local Health Authority, and of the type of case in which legal proceedings should be taken.

Further, that the Committee be requested to consider the existing facilities for efficient observation of smoke emission, and as a corollary, the need or possibility of joint action being taken by various authorities, and, in such an event, the form which such joint action would assume.”

The Executive Committee met on seven occasions, and in June, 1925, they presented their report to the full Conference. The chief recommendations adopted by the Conference will be found in Appendix A of the present Report.

LOCAL EFFORTS TOWARDS SMOKE ABATEMENT:

- (1) The holding of evening classes for stokers.
- (2) A Conference between the Health Committee and the local manufacturers in 1924;
- (3) Smoke observations:—

	1921	1922	1923	1924	1925
Number of observations	20	48	55	72	68
Legal proceedings	0	1	0	2	0

The time limits for the emission of black smoke in Farnworth are as follows:—

1 or 2 boilers	2 minutes per half hour.
3 boilers	3 minutes per half hour.
4 or more boilers	4 minutes per half hour.

Premises and Occupations which can be Controlled by Byelaws or Regulations.**(1) HOUSES LET IN LODGINGS:**

There is only one such house in the district. It is frequently inspected, and although adverse reports have occasionally been received regarding it, they have been of such a nature that the Health Dept. had no power to deal with them. There has been no overcrowding, and any small sanitary defects which have been found have been remedied. We have no Bye-laws dealing with Houses let in Lodgings, but a set has recently been drafted by the Health Committee, and is ready for submission to the Ministry.

(2) COMMON LODGING HOUSES:

There are none in the district.

(3) OFFENSIVE TRADES:

There are only three in the area—two tripe-boilers and one soap maker. These premises are frequently inspected, and no complaints have been received regarding them.

(4) UNDERGROUND SLEEPING ROOMS:

There are none in the district.

Other Sanitary Matters.

The outstanding sanitary reform during the period under review has been the abolition of the insanitary privy-midden. Details of this work are given on page 15. Many hundreds of houses which were not in all respects reasonably fit have received attention. Closing Orders were made in respect of 26 houses. 8 houses have been demolished, and 12 had the Closing Orders determined, the houses having been made fit.

Much still remains to be done. Sewers are required in order that the few remaining privies may be converted. Paving of back streets and yards will have to be attended to. Dry ashpits should be abolished, and a movable ash bin installed at every house.

Schools.

The sanitary condition of the public elementary schools, and the measures taken for safeguarding the health of the scholars are fully described in the Annual Reports of the School Medical Officer.

Housing.

(1) GENERAL HOUSING CONDITIONS IN THE AREA:

The majority of the houses in Farnworth are well constructed of brick, and there are no real "slums." Over 80 per cent. of the houses contain four to five rooms, and only 11 per cent. have under that number. At the 1921 Census it was found that 3,586 out of 6,186 private families lived in four-roomed houses, 736 in three-roomed houses, and 142 in one or two-roomed houses.

(2) SHORTAGE:

The actual shortage of houses is difficult to determine. At the 1921 Census it was found that there were 6,186 private families in Farnworth and that they occupied 6,118 dwellings—figures that would indicate that the erection of 68 more houses would provide each family with a dwelling. When the size of the families is considered, however, we find that, allowing two persons per room, there were 116 families occupying four-roomed houses, which were too small for their requirements, and 146 occupying houses with three or fewer rooms when more accommodation was necessary.

On the other hand, if we were to calculate the shortage on the cubic capacity of the rooms, and if due allowance were made for children under 10 years of age in the various families (two such being reckoned as equal to one adult) the above figures would have to be considerably reduced.

Probably it would not be far wide of the mark to say that at least 200 more houses are required to meet the present shortage.

MEASURES TAKEN OR CONTEMPLATED TO MEET ANY SHORTAGE:

Under the various housing schemes the Council has already built 262 houses. A further scheme is in hand for the erection of 330 more, 70 of which are in process of being built, while sanction has been obtained for 64 more.

(3) OVERCROWDING:

From the figures given in the previous paragraphs, it will be seen that there is a considerable amount of overcrowding in Farnworth. Most of it, however, is caused by families occupying houses which are too small for their requirements—a problem which is concerned rather with the

type of houses in the district than with their actual number. Some of the overcrowding is due to the fact that when members of a family marry, they, in many instances, are unable to obtain a house, and they remain in the parents' home.

Only one case of bad overcrowding was brought to the notice of the department during 1925, and it was dealt with.

While it is true to say that there is little *gross* overcrowding in Farnworth, there is much *moral* overcrowding. Children of opposite sexes, well over the age of puberty, have to sleep in the same bedroom, and frequently in the same bed. The presence of two separate families in a house does not conduce to peace and harmony, and it is difficult, in many cases, to secure the ordinary decencies, let alone the sanctities, of life.

(4) FITNESS OF HOUSES:

When allowance is made for the deterioration that took place in property during the war, and for the arrears which had to be overtaken, the general standard of housing in the area is satisfactory. A number of insanitary properties have been demolished, and others are at present being dealt with, with a view to demolition or reconstruction.

There are very few back-to-back houses left.

The conversion of privy-middens to fresh-water closets, and the paving of back yards have greatly added to the amenities of the district.

A list of the defects found and dealt with during the year will be found on pages 18 and 19. The defects are due, in part, to failure of the owners to keep their property in repair, and in part to the carelessness of tenants, whilst many are the result of ordinary tear and wear.

GENERAL METHOD OF DEALING WITH UNFIT HOUSES:

The majority of the repairs are executed under Section 91 of the Public Health Act of 1875. The washing, cleansing and purifying of walls is carried out under Section 46 of the same Act. New sinks have been provided in many houses under Section 49 of the Public Health Acts (Amendment) Act, 1907. Repairs of a minor nature are done under Section 3 of the Consolidated Housing Act of 1925.

No real difficulty has been found in dealing with properties under the above Acts. Delays have occurred in some instances, but no court proceedings were necessary.

Every house is supplied with Bolton Corporation water, and all houses where sewers are available have fresh water closets. The remaining privy-middens will be converted as soon as sewers are available. No difficulty has been experienced during the year in the matter of refuse removal.

(5) UNHEALTHY AREAS:

There are none in the district.

(6) BYELAWS RELATING TO HOUSES, HOUSES LET IN LODGINGS, AND TO TENTS, VANS AND SHEDS.

The only Byelaws in force are the Building Byelaws, which mainly affect new buildings. New Byelaws affecting (1) Common Lodging Houses: (2) Houses let in Lodgings, and (3) Tents, Vans and Sheds, have been drafted by the Council and await confirmation by the Ministry of Health.

Housing Statistics for the Year 1925.

Number of new houses erected during the year:—

(a) Total (including numbers given separately under (b))...	96
(b) With state assistance under the Housing Acts:—	
(i) By the Local Authority..	84
(ii) By other bodies or persons ..	12

I. UNFIT DWELLING-HOUSES:

Inspection: (1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)..	305
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925 ..	234
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ..	5
(4) Number of dwelling-houses (exclusive of those referred to under (3)) found not to be in all respects reasonably fit for human habitation ..	210

II. Remedy of Defects without Service of Formal Notices:

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers..	70
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III. Action under Statutory Powers:

A. Proceedings under Section 3 of the Housing Act, 1925:—

(1) Number of dwelling-houses in respect of which notices were served requiring repairs ..	204
(2) Number of dwelling-houses which were rendered fit after service of formal notices:—	
(a) By owners ..	255
(b) by Local Authority in default of owners..	nil.
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close..	nil.

B. Proceedings under Public Health Acts:—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied... .. 359

(2) Number of dwelling-houses in which defects were remedied after service of formal notices:—

(a) By owners 333

(b) By Local Authority in default of owners nil.

C. Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925:—

(1) Number of representations made with a view to the making of Closing Orders... .. 1

(2) Number of dwelling-houses in respect of which Closing Orders were made 5

(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit nil.

(4) Number of dwelling-houses in respect of which Demolition Orders were made nil.

(5) Number of dwelling-houses demolished in pursuance of Demolition Orders 4

Inspection and Supervision of Food.

(a) Milk Supply.

Except in the case of one large firm of retailers all the milk supplied to Farnworth is produced within the district. There are 13 dairy farms in the area, and it can be stated that the milk which they produce is, on the whole, of a satisfactory quality, and that the supply meets the demand. This is not to say, however, that the milk supply is all that it ought to be. While it is not to be expected that a farmer can deliver a germ-free article, there is ample evidence that much of the milk which the people consume is badly contaminated with dirt. There is not a dairy farm in the district which could not produce milk of the highest quality if reasonable precautions were observed with regard to cleanliness. The chief hindrance to such production is, in my opinion, the lack of efficient sterilising apparatus at the farms.

Farmers cannot sell their milk to the public without a licence from the Local Authority. It is to be hoped that before long the Authority will have power to withdraw their licence from all producers whose milk does not reach defined standards of cleanliness.

The farms are regularly inspected by the Sanitary Department, and in addition, the cows are inspected four times a year by a qualified veterinary surgeon. Milk is taken from any suspected animal, and if found to be tubercular, the animal is got rid of.

GRADED MILK.—No graded milk is produced in the district, but one licence to sell Grade A milk has been granted to a producer just outside the district.

No licences were refused to retailers during the year, nor were any licences revoked.

BACTERIOLOGICAL EXAMINATION OF SAMPLES.

Number of Sample.	*Bacteria per cubic cent.	Bacillus Coli present in	Tubercle bacilli.
1	2,845	Absent	—
2	96,500	Absent	—
3	78,000	0·01 c.c.	—
4	1,533,333	0·01 c.c.	—
5	15,975	0·1 c.c.	—
6	—	—	Absent
7	—	—	Absent
8	—	—	Absent
9	—	—	Absent
10	—	—	Absent
11	—	—	Present

(b) Meat.

On the 14th May Mr. H. T. Ogden, who holds the Meat Inspector's Certificate of the Royal Sanitary Institute, was appointed Inspector under the Public Health (Meat) Regulations, 1924, for the whole district of Farnworth. The following is the Meat Inspector's Report for the last seven months of the year:—

ARRANGEMENTS FOR INSPECTION AT THE TIME OF SLAUGHTER.

From the 1st June, 1925, a systematic inspection of animals slaughtered for human consumption has been made, and all animals, carcasses, offal and organs have been examined at the time of slaughter in accordance with the Ministry of Health Circular to Local Authorities for the guidance of Local Authorities and their Officers (Memo: 62—Foods).

*For Grade A milk, the number of bacteria present must not exceed 200,000 per c.c. Bacillus Coli, which is evidence of manurial pollution, should not be present in 0·01 c.c.

The following is a tabulated statement as to the number of visits to slaughterhouses each month, and the description of the carcasses examined:

Month	Visits	Heifers	Bullocks	Bulls	Cows	Sheep	Lambs	Pigs	Calves
June	52	18	29	—	9	8	216	28	1
July	54	39	4	1	8	2	252	24	—
Aug.	70	63	8	—	6	—	351	34	—
Sept.	87	52	37	—	13	—	267	70	1
Oct.	70	57	34	—	15	—	189	75	5
Nov.	76	79	23	1	12	—	106	94	10
Dec.	61	71	14	1	9	—	61	57	2
Totals	470	379	149	3	72	10	1442	382	19

CONDEMNED MEAT:

The following is a list of diseased or unwholesome meat which was condemned and destroyed as being unfit for human consumption, as a result of the above inspections:—

Meat Condemned.	Reason for Condemnation.
2 beasts with all organs and offal	Tuberculosis.
6 forequarters of beef	Do.
1 hind quarter of beef	Do.
12 beasts' heads	Do.
26 pairs beasts' lungs	Do.
4 beasts' livers	Do.
9 beasts' mesentery and intestines	Do.
5 cows' udders	Do.
57 beasts' livers	Distomatosis.
8 pairs beasts' lungs	Do.
13 pairs beasts' lungs	Ecchinococcus.
1 beast's liver	Abscesses.
1 brisket of beef	Pleurisy.
1 cow's udder	Mammitis.
60-lbs. bruised beef.	
2 pigs with all organs and offal	Tuberculosis.
21 pigs' heads	Do.
12 pigs' plucks (lungs and livers)	Do.
3 pigs' mesentery and intestines	Do.
4 pairs pigs' lungs	Pneumonia.
1 pig's liver	C. tenuicollis.
Total weight condemned ..	6,757-lbs.

TUBERCULOSIS:

The percentage of carcasses affected with tuberculosis in some degree or other is as follows:—

Cows	35·0 per cent.
Bovines (other than cows)	3·3 per cent.
Pigs	5·7 per cent.

INSPECTION OF CARCASSES SLAUGHTERED IN OTHER DISTRICTS:

At the request of butchers 113 dressed pigs have been examined (i.e., pigs killed in other districts and consigned to Farnworth). 5, or 4·6 per cent. of these pigs were found to be affected with tuberculosis.

CONDEMNED MEAT:

All meat which has been condemned is collected by the Council's Cleansing Dept. and destroyed in a destructor.

Tuberculosis attacks all breeds of cattle and pigs, but sheep are practically immune from the disease. As a rule tuberculosis is generally found in the lymphatic system, which consists of small tubes draining through oyster-shaped bodies varying in size from a pea to a walnut. These are known as glands, and are embedded in the meat itself. The lymphatic glands are examined for the presence of tuberculosis. Occasionally the tubercle bacilli do gain entrance to the blood stream, and as a consequence the disease becomes generalized, and affects the whole carcass and organs.

(c) Other Foods.

UN SOUND FOOD.

The amount of diseased meat found and dealt with is detailed in the report of the Meat Inspector. (See page 27).

In addition to that, 1 box of herrings, 1 codfish and 4 tins of condensed milk were seized as being unfit for human consumption. No legal proceedings were necessary.

BAKEHOUSES:

There are 55 of these in the district. Their sanitary condition during the year was reported as satisfactory.

With regard to premises where other foodstuffs are prepared, these have been inspected by the sanitary staff and found to be satisfactory.

While a comparatively small amount of food (other than meat) has been found to be actually unfit for human consumption, a vast quantity of food is being regularly contaminated through unnecessary exposure. Dust, dirt, flies and even worse sources of pollution find their way on to and into the food, and unfortunately, we possess no powers at present to put a stop to it.

This matter has received much attention of late, and in particular from the Royal Sanitary Institute and the Society of Medical Officers of Health. These two bodies appointed a Joint Committee to go fully into this question, and they presented their Report in July, 1925. The report deals with fish, fruit and vegetables, bread and confectionery, groceries, milk, ice-cream, restaurants and cafes, food regulations, licensing and registration of premises.

The problems dealt with in the Report are of such importance to the general community that they ought to receive the utmost publicity. A summary of the findings of the Joint Committee will be found in Appendix B of this Annual Report.

(d) Food Poisoning.

No case was brought to the notice of the department during the year.

(e) Sale of Food and Drugs Acts.

The administration of these Acts is in the hands of the County Council, and the taking of samples is done by the police. Supt. Turner has kindly supplied me with the following figures which relate to Farnworth for the year 1925:—

Milk	47
Lemon Cheese	5
Butter	3
Lard	3
Carbonate of Soda	3
Coffee	2
Pepper	2
Cheese	2
Cream of Tartar	2
Castor Oil	2
Glycerine	2
Licquorice Powder	2
Custard Powder	1
Ground Rice	1
Magnesia	1
Glauber Salts	1
Epsom Salts	1
Borax	1
Gregory Powder	1
Vaseline	1
Margarine	1
Liver Salts	1
Olive Oil	1
Egg Powder	1
Carraway Seeds	1
TOTAL	88

Proceedings were taken in two cases of Milk Samples and the Vendor fined £2 10s. 0d. and costs in each case. Milk in these cases consisted of 25% and 15% respectively added water.

Prevalence Of, and Control Over, Infectious Diseases.

Infectious Diseases Generally.

The following table shows the number of cases of infectious disease which were notified from 1921 to 1925 inclusive, and the number of deaths:

	1921	1922	1923	1924	1925	Number of Deaths.
Diphtheria	25	18	21	17	12	9
Erysipelas	12	14	17	13	24	0
Scarlet fever	76	84	55	60	79	3
Enteric	4	1	3	3	0	3
Puerperal sepsis	5	4	3	3	3	7
Ophthalmia Neonatorum ..	4	3	6	6	3	0
Malaria	2	—	—	—	—	0
Pneumonia—Acute Lobar and Influenzal	11	37	49	17	24	*170
Tuberculosis: Pulmonary ..	42	30	51	36	31	135
Other forms	21	30	25	28	25	27
Poliomyelitis	—	—	—	1	—	0
Encephalitis Lethargica ..	—	—	—	14	5	2

From the above figures it will be seen that there has been nothing in the nature of an epidemic of any of the notifiable infectious diseases during the past five years. Notifications have been more or less uniform year by year, and the cases have been well distributed over the district. (See also page 10).

*This figure included deaths from all forms of pneumonia, notifiable and non-notifiable.

Diphtheria Antitoxin.

Antitoxin is provided by the Council free of charge for patients residing within the district. A supply is always available for medical practitioners, and is supplied in phials of 8,000 units and of 500 units, the former for curative and the latter for prophylactic purposes.

During 1925 antitoxin to the amount of 336,000 units was issued to medical men.

Encephalitis Lethargica. (See page 10).

"Return Cases".

When a case which has suffered from an infectious disease has, after isolation and treatment in hospital, returned home, and within a reasonable period—say one month—after return another member of the household contracts the disease, the latter is termed a "return case." Return cases occur chiefly in connection with scarlet fever. In Farnworth they have averaged 2 per cent. of the persons attacked. No return cases have been noted of other infectious diseases.

Pneumonia.

The two forms of pneumonia which are compulsorily notifiable are acute lobar and influenzal.

Reference to the table on page 30 will show the number of notifications received in each year of the period under review. The increase in 1922 and 1923 was co-incidental with the epidemic of influenza which prevailed.

Malaria.

During the five years only two cases of malaria were notified, both in 1921, and both were returned soldiers.

Dysentery and Trench Fever.

No notifications were received.

Pathological and Bacteriological Specimens.

With the exception of sputum specimens, these are examined at the Pathological department of Manchester University, the cost of this service being borne by the District Council. The examination of sputa is carried out by the Tuberculosis Department of the County Council, free of charge to the Local Authority.

SPECIMENS EXAMINED DURING 1925.

NATURE OF SPECIMEN.	NUMBER.	RESULT POSITIVE.
Throat swabs	50	11
(for diphtheria)		
Sputum	36	0
(for tuberculosis)		
Blood	8	0
(for typhoid)		
Pleuritic fluid	1	0
(for tuberculosis)		
Faeces	1	0
(for typhoid)		

Contacts.

All cases of notified infectious disease are visited in their homes at the earliest possible moment, and enquiries made regarding possible sources of infection, insanitary surroundings, etc., The names of contacts are ascertained, and if special action is required regarding them, this is carried out. Children in the house who are attending school are dealt with in accordance with the Memorandum issued conjointly by the Board of Education and the Ministry of Health.

Arrangements for Isolation and Disinfection.

Since the closing down of the Farnworth Isolation Hospital cases of infectious disease which have required isolation have been sent to Ladywell Sanatorium, the Farnworth Council paying to Salford Corporation the fee of £4 4s. 0d. per week per patient. Cases are removed to that Institution in the Council's ambulance. Up to the present this arrangement has worked satisfactorily and no complaints have been received.

Disinfection of premises is carried out by the Sanitary department, and infected articles are conveyed to the old Isolation Hospital and disinfected by steam.

No use has hitherto been made locally of the Schick and the Dick tests in diphtheria and scarlet fever respectively, nor have the recently developed artificial methods of immunisation against these diseases been tried.

Smallpox.

Although smallpox has been very prevalent over all parts of England and Wales during the period under review, Farnworth has been fortunate in escaping. It was therefore not necessary for the Medical Officer of Health to carry out any vaccinations as he is empowered to do under the Public Health (Smallpox Prevention) Regulations of 1917.

Non-notifiable Infectious Diseases.

Diseases such as measles, whooping cough, chickenpox, etc., are not notifiable in the district, so that we have to work somewhat in the dark respecting their occurrence.

Information regarding cases reaches us chiefly from two sources (1) The Health Visitors who discover them on their rounds, and (2) The Education Department, to whom they are notified by teachers and the School Attendance Officer. All such cases are visited by the Health Visitors, and instructions given to parents regarding treatment, isolation, etc.

Disinfection of Verminous Persons.

Information on this matter reaches the Department chiefly through the School Medical Service. The Sanitary Inspectors disinfect the houses, and the clothing is dealt with by the steam disinfector.

TABLE V.
TUBERCULOSIS.
New Cases and Mortality during 1925.

Age Periods.	New Cases.				Deaths.			
	Pulmonary		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1	—	—	—	—	—	—	—	—
1—5	—	—	1	2	—	—	—	2
5—10	—	—	2	3	—	—	—	1
10—15	—	—	2	5	—	—	—	1
15—20	—	3	1	3	—	2	—	—
20—25	2	2	1	1	—	1	—	1
25—35	2	4	—	1	1	3	—	—
35—45	3	6	—	2	2	4	—	2
45—55	6	2	—	2	6	1	—	—
55—65	—	—	—	—	2	—	—	—
65 and upwards ..	1	—	—	—	1	—	—	—
TOTALS	14	17	7	19	12	11	—	7
	31		26		23		7	

Public Health (Prevention of Tuberculosis) Regulations, 1925.

These Regulations empower the Local Authority to prevent anyone who is suffering from respiratory tuberculosis from taking part in the milking of cows, the treatment of milk, or the handling of vessels used for containing milk.

No action under these Regulations was necessary during the year.

Public Health Act, 1925. Section 62.

This section empowers a Local Authority to remove compulsorily to hospital infectious persons suffering from pulmonary tuberculosis whose lodging or accommodation is such that proper precautions to prevent the spread of infection cannot be taken, or that such precautions are not being taken.

No action was taken under this section during the year.

TABLE VI.
Summary of work done by Maternity and Child Welfare Department.

	VISITS PAID.						CLINIC.				FREE MILK				
	First Visits	RE-VISITS		EXP. MOTHERS		Special	Infec- tious disease *	TOTAL.	Homes visited	ATTENDANCES.			Dried Milk (lbs.)	Cows' Milk (Pints)	
		Under 1 year.	1-5 years.	First visits.	Re- visits.					Under 1 year	1-5 years	Average attend'ce per session.			Exp. mothers
1925															
January..	..	38	180	313	12	9	—	552	464	270	125	30	10	203	20
February	..	40	203	288	14	8	3	565	455	252	105	30	14	167	—
March	40	231	392	7	11	2	716	539	248	117	28	6	174	1
April	50	218	356	9	12	—	648	509	263	125	35	16	152	40
May	41	230	317	7	6	—	602	492	348	119	36	3	161	42
June	45	204	255	—	4	3	512	401	331	94	39	1	198	29
July	39	220	271	6	7	5	553	442	408	154	45	5	175	—
August	57	216	237	7	6	13	548	425	363	122	40	8	197	7
September	..	41	126	175	4	1	5	352	296	295	89	38	4	173	21
October	30	215	284	9	4	20	567	439	373	147	47	12	203	—
November	43	246	285	4	8	11	609	493	342	143	37	21	193	—
December	40	218	277	3	12	9	561	424	289	180	42	2	168	23
TOTALS	504	2507	3450	82	88	71	6785	5379	3782	1520	37 Aver.	102	2164	183

* Includes Measles, Whooping Cough and Chickenpox.

Maternity and Child Welfare.

The general arrangements made by the Council for attending to the health of expectant and nursing mothers and of children under 5 years of age were fully described in my Annual Report for 1923, and need not be repeated here.

The activities of the department were fully maintained during the year, the same general administrative arrangements holding good.

Home Visits.

The Health Visitors visit all newly-born babies as soon as the midwives discontinue their attendance, which is generally about the tenth day. Particulars are taken regarding each birth, and the mothers are given advice and instructions regarding the rearing of their infants. The importance of breast feeding is always emphasised, and mothers are encouraged to bring their children to the clinic for further help and for regular weighings.

Home visits are continued at regular intervals until the child's first year is completed; thereafter, as occasion requires, until school age is reached.

The Health Visitors also investigate all cases of infant deaths, still births and maternal mortality.

In addition, they report on the environment of the homes visited, and any sanitary defects which may be found are dealt with.

The Welfare Centre.

The centre is open on three afternoons every week, the Medical Officer being present on one of the afternoons to see any cases that are referred to him. Everything is done to encourage expectant and nursing mothers to attend, and to bring such of their children as are under school age. Lectures and health talks are given frequently by the Health Visitors, and the mothers receive instruction in the making of simple garments. At the centre also the various brands of infant food are sold, and in necessitous cases supplied free of cost.

The work at the clinic is greatly assisted by a loyal band of voluntary workers, to whom we are much indebted for their unfailing support.

Details of the work done at the centre will be found on Table VI, page 35.

The following summary shows the nature of the defects for which the Medical Officer was consulted during 1925:—

Number of consultations	379
Malnutrition and general debility, including defects of digestive system	43
Skin	22
Eye	17
Reproductive organs.. .. .	16
Rickets	11
Tonsils and Adenoids	8
Rupture	8
Respiratory organs	7
Ear	4
Mental	4
Infantile paralysis	3

There are no voluntary child welfare associations in Farnworth.

As the Medical Officer of Health is also the School Medical Officer, there is the closest possible co-operation between the child welfare and the school medical services.

Ophthalmia Neonatorum.

Number of cases notified	3
Number of cases treated: At home	2
In Hospital (one attendance only; further treatment carried out at home).. .. .	1
Vision unimpaired	3
Deaths.. .. .	nil.

Health Week.

A very successful Health Week was held in the Moor Hall, Farnworth, from Sunday, October 25th to Friday, October 30th.

Stalls were built, and goods attractively displayed by local tradespeople. The Exhibition also included stalls which were designed for educational purposes.

In this connection mention should be made of the exhibits of diseased food, and also of the excellent photographs kindly lent by the Smoke Abatement League of Great Britain.

The Mothercraft Stall and the Sick Nursing demonstrations proved very attractive and instructive.

We are much indebted to all those who helped to make Health Week a success; particularly our thanks are due to Mr. A. J. Hutchinson, the Electrical Engineer, who superintended the illumination of the Hall. We are also indebted to Miss Seddon and Miss Bolton for their kindness in organising demonstrations of cookery for the mothers.

The following is the Health Week Programme :—

Sunday.	Sermons on Health Topics delivered by the Clergy in the various Churches and Chapels.
Tuesday Evening.	Lecture on "Modern Development of Child Welfare," by Dr. Catherine Chisholm, Hon. Physician to the Manchester Babies' Hospital.
Wednesday Afternoon.	At the Savoy Picture House, Exhibition of the following films:—"Motherhood," "Dr. Wise on Influenza," "Well Born," "Clean Milk Production," "Tommy Tucker's Tooth."
Wednesday Evening.	A Play, entitled "Baby Rearing—the Right and the Wrong Way", given by Farnworth Mothers.
Thursday Evening.	Lecture on "The House I Live In," by Dr. W. H. Bennett, Physician to the Wilkinson Sanatorium.
Friday Evening.	Lecture on "Pure Milk and How to Obtain It," by Colonel J. W. Brittlebank, Chief Veterinary Surgeon to the Manchester Corporation.

Talks on health subjects were given daily to groups of school children.

A. G. GLASS.

APPENDIX "A"

RECOMMENDATIONS ADOPTED

by the

MANCHESTER REGIONAL SMOKE ABATEMENT
COMMITTEE.**(1) Method of Inspection.**

(a) **PATROL SYSTEM.** In the Patrol System the Inspector has no regular round or series of rounds for the taking of observations. He is left a fairly free hand as to how he proceeds. The observations of chimneys taken by him depend upon the type of work in that district, and he very soon learns which parts require most supervision. One great advantage is that his presence is not known to anyone at any given time, and this leads to greater care in the control of firing plant. Visits should include early morning and late evening observations in the summer weather.

The Questionnaire results indicate that two-thirds of the authorities adopt this method.

The results obtained indicate that this system is the best system of inspection in vogue, although the total number of recorded observations is relatively few, inasmuch as the Inspector concentrates upon offending chimneys instead of making observations upon all chimneys whether smoking or not.

(b) **SYSTEMATIC.** Here, the Inspector—having divided his district into sections systematically—goes round the sections taking observations, and completing the circuit within a given time. He takes observations of all the chimneys, whether offending or not.

In this way the Inspector has a large amount of work done to show in the number of observations, but the results show that less effective work is done.

RESOLVED—That the Patrol System be adopted in all cases where it can be applied effectively.

(2) Standard definition of Black Smoke, in such quantity as to be a nuisance.

Black smoke of such density as that light cannot be seen through it as it issues from the chimney top.

So far as possible the line of vision of the observer should be at right angles to the direction in which the smoke is travelling.

The distance of the observer from the chimney will depend upon the local circumstances and visibility at the time of observation, and no hard and fast rule can be laid down. Under normal circumstances from one hundred to five hundred yards may be taken as the best distance.

The use of the Rungelmann Chart is hardly practicable in the patrol system of inspection, unless in special cases where its employment would be of value as giving additional evidence for the purposes of prosecution.

RESOLVED.—That the above definition be accepted.

(3) Time Concession.

The second paragraph of sub-section 7, section 91 of the Public Health Act, 1875, entirely prohibits nuisance from black smoke, and the Courts have held that under this Section there is no defence possible on the lines of the "best practicable means" clause. There are exceptions, however, provided for in Section 334, where certain trade processes are enumerated, but these it is not necessary at present to refer to.

The Departmental Committee on Smoke and Noxious Vapours Abatement declared after due consideration that "little or no smoke need be produced by boiler furnaces." This is true, but under present conditions both of practice and knowledge of fuel consumption it is necessary that in practical working we admit the need of a concession or time limit for the emission of black smoke from a works chimney. It is very inadvisable to use the words "standard emission period" inasmuch as with proper conditions there need be no emission at all. "Concession" is the correct description.

From the replies to the questionnaire this concession varies from two minutes in the half hour to 10 or 12 minutes in the hour, and the practice varies so much that no useful summary could be made of the time limit of the concession.

It is obvious that this Committee should direct its consideration to the shortest concession period which has proved to be successful in its practical application. This is under two minutes in the aggregate in the half hour which has for over thirty years been adopted as the line of guidance in smoke control in the City of Manchester. Emission for two minutes is considered to be justification for prosecution. This practice has reduced the manufacturing smoke in the City, both from boilers and from chemical, metallurgical and other furnaces to a small fraction of what it was 25 years ago. There is every reason therefore for urging that this should be the maximum concession to be recommended for adoption throughout the joint area by this Executive Committee.

The emission of smoke is timed to bursts of 30 seconds, i.e., emissions lasting more than 30 seconds are added together, and if in the aggregate two minutes of such emissions are found in any half hour, the case is reported with a view to legal proceedings being taken. If the record of the firm is a good one, and the offence is not extreme, a cautionary letter in the first instance is frequently effective, without Court proceedings being instituted.

The experience of Manchester has been that there is no need for varying the concession according to the number of boilers.

Should any case arise in which the black smoke emissions are so timed as just to keep the firm outside the limits of concession already mentioned, such a case has to be dealt with as a particular issue, special observations being taken and special report made to the Local Authority with a view to suitable action being taken.

RESOLVED.—That the recommendations contained in the report be approved and adopted with the following emendation that instead of the words—

"The emission of smoke is timed to bursts of 30 seconds" it shall read—

"The emission of smoke is timed to bursts of 15 seconds."
(This was amended to 30 seconds for a period of 12 months, after which it was to be reviewed).

(4) Formation of United District.

For the suppression of offensive manufacturing smoke, constant observation of chimneys is necessary. Even when something like control is obtained, the presence of the Inspector on the District is necessary to prevent lapse.

For this reason Inspectors whose whole time is devoted to smoke work are necessary in all industrial areas. The Sanitary Inspector cannot, from the oft-times urgent and tying nature of his other duties, deal with smoke nuisance in the effective manner which the urgent importance of this question renders necessary.

The great difficulty is that the country is split up into so many small units, and only a few of these can employ whole-time Inspectors for Smoke Work.

In a large industrial area such as that represented by this Regional Committee, some way of grouping the various authorities is necessary for the effective control of the smoke nuisance.

It appears that by Section 279 of the Public Health Act of 1875 the Ministry of Health has power to declare any group of districts a united district for the purposes of smoke abatement, and Sections 280 to 284 deal with the constitution, powers and finance of such United Districts.

This is probably the only way in which uniformity of administration and practice could be insured.

The United District Committee would group the various districts into sub-districts, and decide the number of Inspectors to be employed. Probably the actual work for each sub-district would be carried out by a sub-committee for that district.

The United District Committee, of necessity, would be in supreme control of the work, and the Sub-District Committees would be required to make regular reports to the main Committee of the work done and the action taken in their areas.

The United Committee would have an Inspector to supervise and advise the sub-district Inspectors.

Judging from Manchester's experience one Inspector can deal effectively with about 250 chimneys. Of course, the area has to be taken into account, but this may be taken as a basis for grouping.

Taking 250 chimneys as the basis of calculation, although little more than half the Questionnaire has been replied to, averaging from the figures obtained, the number of chimneys in the area will be about 5,000. This would mean 20 sub-district Inspectors.

RESOLVED.—That this conference of representatives of Local Authorities within the Irwell and Mersey Watershed recommends their various constituent authorities to adopt the policy contained in the report, and to agree to an application being made to the Ministry of Health for an Order forming a United District for the purpose of administering the Smoke Clauses of the Public Health Act.

(5) Suggestions re Scheme and Grouping of Authorities.

Dr. Veitch Clark submitted the following scheme as a basis for discussion, with a view to the formation and grouping of a United District.

- (1) That the Ministry of Health be asked to make an Order forming a Joint District.
- (2) That the Local Authorities forming the Regional Area be grouped together in Inspectorial Districts so far as possible, those Districts which have common interests being joined together in "family groups" on the basis of 200-250 chimneys per inspectorial district.

- (3) That each inspectorial district be governed by a Committee elected from the Health Committee of each district in the group.
- (4) That each inspectorial district Committee elect two of its members to form the Regional Council.
- (5) The functions of the Inspectorial District Committee would be to carry out the policy decided upon by the Regional Council, and would have full powers delegated to it by the Regional Council to carry out the provisions of the Act in its area. It would report regularly to the Council.
- (6) The Regional Committee would formulate the policy, have supervision over, and act in an advisory capacity to the District Inspectorial Committees.
(The number of chimneys being between 4,600 and 5,000, some 20 Inspectorial Districts would be formed, consisting of an average of five Authorities to each).

(6) **Propaganda.**

The following report was read and after discussion approved:—

SMOKE ABATEMENT PROPAGANDA.

It is felt that anything which may be done in the way of anti-smoke propaganda would be more effective if it were carried out under the aegis of an official body such as the proposed Manchester and District Regional Smoke Committee, than if conducted by an unofficial voluntary body such as the Smoke Abatement League of Great Britain. It is, however, realised, that the Smoke Abatement League, having been in existence for some time and having accumulated much valuable information might, with advantage, be asked to co-operate with the general propaganda work. This body is preparing literature dealing with industrial as well as domestic smoke which will be suitable for the general public. The League is also compiling a list of experienced lecturers and is drawing up skeleton lectures with appropriate illustrations, charts and lantern slides.

The Smoke Abatement League might be approached with a view to co-operating with the Regional Committee in the preparation of literature, approved of by this Committee, and publishing it under the auspices of the proposed Manchester & District Regional Smoke Committee in order to give the literature the stamp of official authority. It is suggested that booklets and pamphlets be published dealing with the smoke evil in its widest aspects, namely, its detrimental effect on health, vegetation and architecture, and explaining the economic loss to all concerned of the present methods of using raw coal as a fuel. This literature should consist of authentic records, observations and experiments, and the duly considered opinions and pronouncements of medical and technical authorities.

As distinct from general propaganda and in addition to the more advanced lectures that are now being given in the several technical institutes, elementary lectures and demonstrations by competent instructors should be held for firemen in the various districts. In this way firemen would have practical training in the more efficient methods of stoking. Charts should be prepared giving a list of elementary rules for stoking and boiler management, and these should be hung up in each stoke hole or boiler house and thus supplement the training the stokers have received.

W. T. JACKSON,
Chairman.

APPENDIX "B."

REPORT OF THE JOINT COMMITTEE ON THE HANDLING OF FOOD.

(1) The Committee were greatly impressed by the fact that apparently Great Britain was practically alone amongst the more advanced of the Nations in having failed to take cognizance of the existence of risk to health and of the production of disease as a result of defective and careless exposure and handling of food, and to provide legislation for the protection of the people from such risks.

(2) From the reports it was noted that though there were in most trades certain special directions from which risk might come, and particular defects capable of amendment, there were also certain defective conditions that were common to all, arising mainly in relation to unnecessary exposure of food stuffs both by wholesalers and retailers and in process of transportation.

(3) So far as regards persons concerned or interested in public health and administration, it is probably unnecessary to give any details at all of the defects referred to. By the mass of the public, however, the defects, that are so obvious to Health Officers and others, would appear to be unnoticed, or to be accepted as inevitable accompaniments of the trade in food. Otherwise it seems certain that the serious contamination by dogs of vegetables stacked on the street and pavement around wholesale markets and at the entrance to or in front of shops would not be allowed to continue.

(4) Equally it seems certain that, if the public themselves had really been concerned, Dr. Orr would not be in a position to allege, as he does in his monograph on Milk that considerable as the effort to educate the milk producer has been, only a fraction of the trade has been induced to make any serious attempt to remedy the defects in the handling of this commodity. Nor would Sir Wilfred Beveridge in writing of Groceries, and Dr. Cates in dealing with Bread and Confectionery, refer to the conspicuous lack of cleanliness in the exposure of such articles as sugar and dried fruits, and in the handling of bread, biscuits and confectionery.

(5) Defects in relation to transport are referred to particularly in the monographs on Fruit and Vegetables (Dr. Fenton), Bread and Confectionery (Dr. Cates), and Milk (Dr. Orr). In the case of milk and vegetables, which frequently have to travel considerable distances by rail, the Committee agree with the reporters that at present the provision made for ensuring protection from contamination at all stages is inadequate. The trucks and vans provided by the railway companies are in many cases not properly constructed for food transportation, and no such discrimination is exercised as would ensure the carriage of foods apart from other and often unsuitable and even dangerously contaminating articles. Milk, notoriously a food material prone to contamination and to cause injury to consumers if contaminated, not only is commonly transported with ordinary merchandise and baggage, but is invariably contained in churns with loose and easily removable covers.

(6) The Committee is convinced that the case for suggesting that the time has arrived for providing legislation more definitely aimed at protecting the food of the people than any now in existence, is greatly strengthened by the special investigations made by individual members. It is recognised that the objections urged against the methods adopted are less on the public health than the æsthetic side, and that little or no definite evidence of injury to health is offered. The difficulties in the way of producing such evidence are, however, enormous, and in any case and fortunately, it is only very rarely that anything in the shape of definite disease is traceable to food contaminated as a result of careless handling or exposure. Vague disturbances of health and digestion that may be caused by such contaminations are rarely particularly noted and practically never investigated.

(7) Even if æsthetic grounds are those that alone can be established, the Committee feel strongly that, having regard to the great variety of conditions that may and do affect food and exert an influence in relation to its nutritive qualities, they are sufficiently strong to justify legislative action with a view to securing adequate supervision and the exercise of such care and cleanliness as will ensure the decency that the increasing refinement of the people demands, and that the changed conditions, the result of the intensified urbanisation of this country, compel.

(8) So far as public demand is concerned, the Committee would point out that though it may be true that there is a large proportion of the population who take no heed of the conditions under which food is handled and dealt with, there is nevertheless a considerable body of public opinion demanding the exercise of greater care. That the number in favour of improvements will grow, is certain.

(9) As evidence of movement in this direction, the Committee desire to direct attention to the fact that in a certain number of districts legislation has been promoted with a view to enforcing it. In the monographs prepared by Dr. Allan and Dr. Barlow, reference is made to this fact, the names of the districts are given, and the provisions in operation in some of these districts are outlined. As further evidence there are the Public Health (Meat) Regulations, 1924, of the Minister of Health, which came into operation on April 1st, 1925, and which already have led to considerable improvements in the businesses to which they refer.

(10) The legislation and the regulations mentioned, in the view of the Committee, in addition to indicating the need for legislative interference with the trade in food generally, indicate also that the time is ripe for legislation, and to some extent show the lines that should be followed.

(11) In all of the monographs submitted with regard to particular trades, one point stressed is that the primary need in order to ensure the carrying out of supervision is Registration. With this opinion the Committee in general is in agreement. The Committee regard it as a real anomaly that whereas the trader in milk and the manufacturer of butter and margarine may not operate on unlicensed premises, dealers in other articles of food may set up business in the open street or in any premises they choose. The Committee hope that if, as they would strongly urge, the Minister of Health takes action by issuing regulations relating to food businesses, one of the requirements will be that all food premises shall

be registered with the local authority, and that no premises shall be occupied for any purpose connected with the preparation, storage, or sale of food of man, until they have been registered.

(12) In addition to such an initial requirement, it appears to the Committee that there are several others that might be made generally applicable to all persons concerned in the trade in food articles, and directed to the prevention of exposure to contamination, and of unclean and careless handling at all stages and in relation to all processes. In this connection the Committee desire to direct attention to the Final Report of the Departmental Committee on the Use of Preservatives and Colouring Matters in Food, in the final paragraph (209) of which the opinion is expressed that, "if proper and cleanly methods of food preparation are to be generally secured, some further control is necessary," and it is indicated that this may be obtained by a system of licensing or registration.

(13) In this same report also, comment is made (paras. 166-168) upon the "shortage in this country of adequate provision of cool storage and transport" for food. In several of the memoranda prepared by Members of the Joint Committee this matter is also dealt with, and in the Public Health (Meat) Regulations, provisions are included with the object of securing cleanliness in this regard in the case of meat. The Committee desire to express agreement with the conclusions reached by the Departmental Committee on the Use of Preservatives and Colouring Matters in Food, and to point out that in respect of foods other than meat, provisions no less far-reaching than those contained in the Meat Regulations are necessary. The necessity of making any regulations apply definitely to all persons engaged in transport of food, including the railway companies; this the Committee desire to stress. They would urge also that all means possible should be adopted to compel not only the provision by these and others of proper means of transport, but the exercise of care in relation to handling and disposal while in course of transport.

(14) As regards exposure and handling of foods, the need that has been recognised for dealing with these matters in the case of meat by the Public Health (Meat) Regulations, the Committee are of opinion should be extended to include all classes of food. Having regard to the fact that many of the other foods are consumed uncooked, the need existing—it is claimed—is even greater, and the grounds for the making of even more drastic provisions than in the case of meat, much stronger. The justification for this suggestion is to be found in the separate memoranda in which attention is directed to the conditions existing in relation to the exposure of, for instance, fruit and vegetables, and conspicuously of sweetmeats, in the open street.

(15) In regard to handling, though the Committee recognise the existence of very serious difficulties in the way of obtaining control in this matter and over handlers, they desire to direct attention to the attempts that have been made in parts of the United States of America to eliminate from the trade in cooked foods, individuals capable of carrying diseases, in the enteric group particularly. This being one of the directions in which proof of definite danger to health arising is obtainable, no effort should be spared to discover some method of dealing with it, and the practical experiments in the American cities should be most closely followed. In the memoranda by Dr. Allan references are made to the work that has been done and the regulations that have been made by certain health authorities in regard to it.

(16) To the question as to the line that should be taken in providing the legislation held to be necessary in order to ensure control and protection of the health interests of the consumer in relation to the distribution and marketing of food, the Committee have given much consideration. In the Public Health (Regulations as to Food) Act, 1907, the Minister of Health, it seems clear, has adequate powers to make regulations relating to food, and covering most of the aspects that have been referred to. Under these powers several sets of regulations have already been issued, the latest being the Public Health (Meat) Regulations, 1924, already mentioned. That the power given is sufficiently extensive to permit of the introduction of a requirement calling for Registration is perhaps open to question; but if such power is absent, then it should be sought at the earliest moment. That the Minister of Health considers the most satisfactory method of procedure is by way of separate regulations relating to each food, would appear to be indicated by the regulations already issued. That this is the opinion of local authorities also, is suggested by the fact that several, as shown in the memoranda of Dr. Allan and Dr. Barlow, have included provisions in local Acts of Parliament, most of them relating to meat and meat products alone. In the opinion of the Committee procedure and administration would be greatly simplified if one set of regulations were issued containing provisions affecting the several matters that are common to all foods, such as transport, and if possible, registration, and a general prohibition of exposure on the street, of meat, fruit, sweets, and the more important and readily contaminated articles; reserving separate regulations for any trade or article, e.g., bread, that called for specific regulation. In the United States of America and other countries, as shown by Dr. Allan in his summary of foreign legislation, it appears to be the practice to deal with each trade by means of separate regulations. It is noted also that in the States, the making of the regulations is in the hands of the local authorities. This method, the Committee would suggest, has many advantages, and in connection therewith desire to recommend to the Minister of Health the adoption of this practice, which in fact already exists in relation to sanitation, powers to make by-laws being in the hands of local authorities, the central body securing control by forbidding the operation of the provisions until approved by them, and by issuing model by-laws for the guidance of the local bodies.

(17) The information which has been gathered by the Members of the Committee is of much public importance, as affecting the question of cleanliness in the handling and preparation of food, and they think that the matter should be brought to the notice of the Ministry of Health, and should be made available to Local Authorities.

(Signed) CHARLES PORTER,
Chairman.

